Approved for use through 9/30/00. OMB 0651-032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

		Attorney Docket Numbe	MTI-31079-A				
DECLARAT	ION FOR UTILITY OR DESIGN	First Named Inventor	Budge, William				
PATE	NT APPLICATION	COMPLETE IF KNOWN					
	37 CFR 1.63)	Application Number					
, `	_	Filing Date					
<ul><li>Declaration</li><li>Submitted</li><li>OR</li></ul>	☐ Declaration OR Submitted after Initial	Group Art Unit					
with Initial Filing	Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name					

	<del></del>								
As a below named inventor, I hereby declare that:									
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
Use of Linear Injectors to Deposit Uniform Selective Ozone Teos Oxide Film									
by Pulsing Reactants On and Off									
the specification of which (Title of the Invention)  X is attached hereto									
OR was filed on (MM/I	200000	as Units	d States Applica	tion Number or PCT Inte	mational				
was med on (white		as office	o otates Applica		i redoriei				
Application Number		ras amended on (MM/DD/Y	,		pplicable).				
I hereby state that I have re amended by any amendme	eviewed and understand the ent specifically referred to ab	contents of the above identione.	ified specification	n, including the claims, a	s				
I acknowledge the duty to	disclose information which is	material to patentability as	defined in 37 CF	R 1.56.	·				
· · · · · · · · · · · · · · · · · · ·	<u> </u>								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application		Foreign Filing Date	Priority	Certified Copy Atta	ached?				
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES NO	)				
	<del></del>		لسيا						
	tion numbers are listed on a								
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
Application Number	(s) Filing Dat	e (MM/DD/YYYY)							
				nal_provisional_applic	ation				
				rs are listed on a mental priority data sl	heet				
•				B/02B attached herel					
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLA	ARATION		Utility	y or	Des	igr	Pate	nt /	Ap	plicati	on
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.											
U.S. Parent Application or PCT Parent Parent Filing Date Parent Patent Num Number (MM/DD/YYYY) (if applicable)											
09/652,188		<del></del>			08/31/2000						
Additional U.S. of As a named inventor,	or PCT international									<del> </del>	
and Trademark Office		Cust	omer Numb	oer [022	202				→「	Place Cu Number B Label	istomer ar Code
	<del> </del>	A) Kegi	Registi		namerreg	nstrati	ion number li		- W		gistration
- Na			Num				Nan		<u> </u>	<del></del>	lumber
Gary R. Plotec		27	830				E. Wagi			4518	
Kristine M. Stı	rodthoff	34:	259		1		nas J. Pie		tos 4699		
Alexander R. I			920				ael L. L			3087	
X Additional register	ed practitioner(s) nan	ned on sup	plemental r	Registered	Practition	ner Ir	nformation sh	eet PTO	/SB/02	C attached he	ereto.
Direct all correspond		stomer N Bar Code		02220	2		OR	□ c	orresp	ondence ad	dress below
Name			<del></del>								
Address											
Address					7.			· · ·		<del></del>	
City					State	丄		ZIP			
Country	Telephone			,				Fax		· · · · · · · · · · · · · · · · · · ·	
believed to be true; as punishable by fine or	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.										
Name of Sole or	Name of Sole or First Inventor: A petition has been filed for this unsigned inventor										
Given Nar	me (first and middle	[if any])					Famil	y Name	or Su	ırname	
William Budge											
Signature	inventor's Signature Date 07/25										
Residence: City	Homedale State ID Country USA Citizenship USA							7104			
Post Office Address	st Office Address 404 Cascade										
Póst Office Address											
City	Homedale State ID ZIP 83628 Country USA										
Additional invento	rs are being name	d on the	supp	lemental	Additio	nal Ir	oventor(s) s	heet(s)	PTO/	SB/02A atta	ched heret

## **DECLARATION**

## ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additio	nal Joint Inventor, if	any:			A petition	on has been file	ed for th	nis unsigne	ed in	ventor
Given Name (first and middle [if any])				Family Name or Surname						
Gurtej S.		· <u></u>		Sand	hu _	<u> </u>	·		·	
Inventor's Signature	(mt)	I.A.	Ses					7 24/0 Date	1	
Residence: City	Boise	Stat	ID _		Country	USA		Citizenshi	pl	J <b>K</b>
Post Office Address	2964 E. Parkriver Dri	ive		-	··	·		·	· 	
Post Office Address				· —						
City	Boise	Stat	iD		ZIP 8	3706	Country	USA		
Name of Addition	nal Joint Inventor, if a	any:			A petitio	n has been file	d for th	is unsigne	d inv	ventor
Given Na	me (first and middle [if ar	ny])				Family Na	me or S	Sumame		
Christopher W.			<u> </u>	H	ill			<u></u>		
Inventor's Signature	Hinsiph	W· 1	tie					7/25 Date	/01	
Residence: City	Boise	State	ID		Country	USA		Citizensl	hip	USA
Post Office Address	1015 N. 16th					2 - 2		:		
Post Office Address										
City	Boise	State	ID		ZIP	83702	Count	USA	<u> </u>	
Name of Addition	nal Joint Inventor, if a	ny:			A petition	n has been filed	for this	s unsigned	l' inv	entor
Given Nar	ne (first and middle [if an	yl)				Family Nan	ne or S	urname		
					<u>.</u>					
Inventor's Signature								Date		
Residence: City		State		c	ountry			Citizensh	ip	
Post Office Address							·			
Post Office Address			· · · · · · · · · · · · · · · · · · ·			T				
City	·	State			ZIP		Co	untry		

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

sign (+) inside this box  $\rightarrow$  + PTO/SB/02C (3-97)

Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION**

## **REGISTERED PRACTITIONER INFORMATION** (Supplemental Sheet)

Name	Registration Number	Name	Registration Number
Charles B. Brantley, II	38086		÷
Elisabeth T. Bridge	37523		:
·			
		·	
	·		
·			

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.